PTO/SB/17 (12-04) Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

eduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

THAT THAT	ffective on 12/08/2004.	Complete if Known				
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818)		Application Number	09/713,235			
FEE TRANSMITTAL		Filing Date	November 16, 2000			
F	or FY 2005	First Named Inventor	Takeshi YAMA	ZAKI, et al.		
Applicant claims	small entity status. See 37 C.F.R. 1.27	Examiner Name	J. Grant II			
		Art Unit 2626				
TOTAL AMOUNT OF PAYMENT (\$) 250.00 Attorney Docket No. 03500.014929						
METHOD OF PAYMENT (check all that apply)						
X Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17 Charge fee(s) indicated below, except for the filing fee						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION			<u> </u>			
BASIC FILING, SEA Application Type	ARCH, AND EXAMINATION FEES FILING FEES SEA Small Entity Fee (\$) Fee (\$)	Small Entity	AMINATION FEE Small Entity (\$) Fee(\$)	S <u>Fees Paid (\$)</u>		
Utility	300 150 500					
Design Plant	200 100 100 200 100 300					
Reissue	300 150 500	250 60	00 300			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims						
30 - 25 or HI	P = 5	0 <u>F</u>	<u>Fee(\$)</u> <u>F</u>	ee Paid (\$)		
Indep. Claims	Extra Claims Fee(\$)	Fee Paid (\$)		 		
12 - 12 or HP = 0 x 200.00 = 00.00 HP = highest number of independent claims paid for, if greater than 3						
 APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). 						
Total Sheets		dditional 50 or fraction ther		Fee Paid (\$)		
100 =	/ 50 =	(round up to a whole r	number) x			
4. OTHER FEE(S) Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)						
Other:						
OUDMITTED DV						
SUBMITTED BY	11/1	Registration No.		Telephone		
Signature	/ CMh	(Attorney/Agent)		202-530-1010		
Name (Print/Type)	Brian L. Klock			Date: October 14, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or assignation for reducing this burden, should be sent to the Chief Information Officer, U.S. Paternativo Cffice, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re	Application of:)	
	•	:	Examiner: J. Grant II
Takes	shi YAMAZAKI, ET AL.)	
		:	Group Art Unit: 2626
Appli	cation No.: 09/713,235)	
		:	
Filed	November 16, 2000)	
		:	
For:	IMAGE PROCESSING APPARATUS,)	October 14, 2005
	IMAGE PROCESSING METHOD,	:	
	AND STORAGE MEDIUM)	

Mail Stop Amendment

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated August 24, 2005, please amend the application as indicated below.

10/18/2005 MBEYENE1 00000023 09713235

01 FC:1202

250.00 OP